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7
8 **BEFORE THE**
9 **BOARD OF REGISTERED NURSING**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 2013-473

13 **SHARON ELIZABETH SENESTRARO**
14 **905 E. Street**
15 **Eureka, CA 95501**

ACCUSATION

16 **Registered Nurse License No. 600495**

17 Respondent.

18 Complainant alleges:

19 **PARTIES**

20 1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her
21 official capacity as the Executive Officer of the Board of Registered Nursing, Department of
22 Consumer Affairs.

23 2. On or about June 11, 2002, the Board of Registered Nursing issued Registered Nurse
24 License Number 600495 to Sharon Elizabeth Senestraro (Respondent). The Registered Nurse
25 License was in full force and effect at all times relevant to the charges brought herein and will
26 expire on June 30, 2014, unless renewed.

27 **JURISDICTION**

28 3. This Accusation is brought before the Board of Registered Nursing (Board),

1 Department of Consumer Affairs, under the authority of the following laws. All section
2 references are to the Business and Professions Code unless otherwise indicated.

3 4. Section 2750 of the Business and Professions Code ("Code") provides, in pertinent
4 part, that the Board may discipline any licensee, including a licensee holding a temporary or an
5 inactive license, for any reason provided in Article 3 (commencing with section 2750) of the
6 Nursing Practice Act.

7 5. Section 2764 of the Code provides, in pertinent part, that the expiration of a license
8 shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the
9 licensee or to render a decision imposing discipline on the license.

10 6. Section 118, subdivision (b), of the Code provides that the expiration of a license
11 shall not deprive the Board of jurisdiction to proceed with a disciplinary action during the period
12 within which the license may be renewed, restored, reissued or reinstated.

13 STATUTORY AND REGULATORY PROVISIONS

14 7. Section 2761 of the Code states:

15 "The board may take disciplinary action against a certified or licensed nurse or deny an
16 application for a certificate or license for any of the following:

17 "(a) Unprofessional conduct, which includes, but is not limited to, the following: . . ."

18 8. Section 2762 of the Code states:

19 "In addition to other acts constituting unprofessional conduct within the meaning of this
20 chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this
21 chapter to do any of the following:

22 "(a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed
23 physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or
24 administer to another, any controlled substance as defined in Division 10 (commencing with
25 Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as
26 defined in Section 4022.

1 "(b) Use any controlled substance as defined in Division 10 (commencing with Section
2 11000) of the Health and Safety Code, or any dangerous drug or dangerous device as defined in
3 Section 4022, or alcoholic beverages, to an extent or in a manner dangerous or injurious to
4 himself or herself, any other person, or the public or to the extent that such use impairs his or her
5 ability to conduct with safety to the public the practice authorized by his or her license.

6 "(c) Be convicted of a criminal offense involving the prescription, consumption, or self-
7 administration of any of the substances described in subdivisions (a) and (b) of this section, or the
8 possession of, or falsification of a record pertaining to, the substances described in subdivision (a)
9 of this section, in which event the record of the conviction is conclusive evidence thereof.

10 "(d) Be committed or confined by a court of competent jurisdiction for intemperate use of
11 or addiction to the use of any of the substances described in subdivisions (a) and (b) of this
12 section, in which event the court order of commitment or confinement is prima facie evidence of
13 such commitment or confinement.

14 "(e) Falsify, or make grossly incorrect, grossly inconsistent, or unintelligible entries in any
15 hospital, patient, or other record pertaining to the substances described in subdivision (a) of this
16 section."

17 9. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
18 administrative law judge to direct a licensee found to have committed a violation or violations of
19 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
20 enforcement of the case.

21 10. Code section 4060 provides, in pertinent part, that no person shall possess any
22 controlled substance, except that furnished upon a valid prescription/drug order.

23 11. Health and Safety Code section 11173(a) states, in pertinent part, that no person shall
24 obtain or attempt to obtain controlled substances, or procure or attempt to procure the
25 administration of or prescription for controlled substances by fraud, deceit, misrepresentation or
26 subterfuge.

27 12. Health and Safety Code section 11170 provides that no person shall prescribe,
28 administer, or furnish a controlled substance for himself or herself.

13. Health and Safety Code section 11377, in pertinent part, makes it unlawful to possess any controlled substance in Schedule II, subdivision (d), without a prescription.

14. Health and Safety Code section 11550, in pertinent part, makes it unlawful for any person to use or be under the influence of any controlled substance in Schedule II (Health and Safety Code section 11055), subdivision (d)(1) or (d)(2), or any narcotic drug in Schedules III-V, except when administered by or under the direction of an authorized licensee.

DRUGS

15. Demerol is a brand of meperidine hydrochloride, a Schedule II controlled substance as designated by Health and Safety Code section 11055(c)(17) and is a dangerous drug per Code section 4022. It is used for moderate to severe pain.

FIRST CAUSE FOR DISCIPLINE

(ILLEGALLY OBTAIN OR POSSESS CONTROLLED SUBSTANCES)

16. Respondent is subject to disciplinary action under Code sections 2762(a) and 4060, Health and Safety Code section 11377 and Health and Safety Code section 11173(a), in that while on duty as a registered nurse in the Emergency Department at St. Joseph Hospital in Eureka, California, Respondent illegally obtained and/or possessed controlled substances as follows:

17. Patient A: On January 30, 2011 at 13:37, Respondent removed 100 mg of Demerol from the hospital Pyxis¹ without a physician's order; however, the patient was discharged at 13:35. Respondent failed to document administration of the medication or otherwise account for its disposition.

18. Patient B: On January 30, 2011 at 16:22, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order; however, the patient was discharged at 11:00. Respondent failed to document administration of the medication or otherwise account for its disposition.

19. Patient C: On January 30, 2011 at 19:07, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document

¹ Pyxis is a computerized hospital medication dispensing system.

administration of the medication or otherwise account for its disposition.

20. Patient D: On February 1, 2011 at 12:54, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

21. Patient E: On February 1, 2011 at 15:04, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order; however, the patient was discharged at 15:00. Respondent failed to document administration of the medication or otherwise account for its disposition.

22. Patient F: On February 1, 2011 at 16:35, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

23. Patient G: On February 1, 2011 at 19:13, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

24. Patient H: On February 5, 2011 at 12:56, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

25. Patient I: On February 5, 2011 at 15:35, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

26. Patient J: On February 5, 2011 at 18:34, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

27. Patient K: On February 6, 2011 at 10:42, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

28. Patient L: On February 6, 2011 at 12:52, Respondent removed 100 mg of Demerol from the hospital Pyxis without a physician's order. Respondent failed to document administration of the medication or otherwise account for its disposition.

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SECOND CAUSE FOR DISCIPLINE

(DANGEROUS USE OF NARCOTICS)

29. Respondent is subject to disciplinary action under section 2762(b), Health and Safety Code section 11550 and Health and Safety Code section 11170 in that she diverted and used narcotics to an extent dangerous to herself or others. Respondent diverted Demerol as alleged above in paragraphs 17 to 28. On April 14, 2011, when confronted by the Director of Emergency Services at St. Joseph Hospital, Respondent admitted to taking morphine and Demerol from the hospital for her own use.

THIRD CAUSE FOR DISCIPLINE

(FALSIFY, OR MAKE GROSSLY INCORRECT, GROSSLY INCONSISTENT, OR UNINTELLIGIBLE ENTRIES IN ANY PATIENT RECORD)

30. Respondent is subject to disciplinary action under Code section 2762(e), in that while on duty as a registered nurse at St. Joseph Hospital in Eureka, California, Respondent falsified, made grossly incorrect, grossly inconsistent, or unintelligible entries in hospital and patient records, as alleged above in paragraphs 17 to 28.

FOURTH CAUSE FOR DISCIPLINE

(UNPROFESSIONAL CONDUCT)

31. Respondent is subject to disciplinary action under section 2761(a) in that she acted unprofessionally as alleged above in paragraphs 17 to 28.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

1. Revoking or suspending Registered Nurse License Number 600495, issued to Sharon Elizabeth Senestraro;

2. Ordering Sharon Senestraro to pay the Board of Registered Nursing the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3;

3. Taking such other and further action as deemed necessary and proper.

DATED: December 10, 2012 for Stacy Ben
 LOUISE R. BAILEY, M.ED., RN
 Executive Officer
 Board of Registered Nursing
 Department of Consumer Affairs
 State of California
 Complainant

SF2012403257
accusation.rtf

**BEFORE THE
BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

SHARON SENESTRARO
a.k.a. SHARON ELIZABETH DIMINO
314 Corinna Court
Fortuna, CA 95504

Registered Nurse License No. 600495

Respondent.

Case No. 2006-193

OAH No. 2006060936

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted by the Board of Registered Nursing, Department of Consumer Affairs, as its Decision in this matter.

This Decision shall become effective on August 24, 2007.

It is so ORDERED July 25, 2007.

LaTranene H Tate

FOR THE BOARD OF REGISTERED NURSING
DEPARTMENT OF CONSUMER AFFAIRS

1 EDMUND G. BROWN JR., Attorney General
of the State of California
2 FRANK H. PACOE
Supervising Deputy Attorney General
3 LESLIE E. BRAST, State Bar No. 203296
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6 Facsimile: (415) 703-5480

7 Attorneys for Complainant

8 **BEFORE THE**
9 **BOARD OF REGISTERED NURSING**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

13 **SHARON SENESTRARO**
a.k.a. SHARON ELIZABETH DIMINO
14 314 Corinna Court
Fortuna, CA 95504

15 Registered Nurse License No. 600495

16 Respondent.

Case No. 2006-193

OAH No. 2006060936

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

17
18 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the
19 above-entitled proceedings that the following Stipulated Settlement and Disciplinary Order will
20 be submitted to the Board for approval and adoption as the final disposition of the Accusation.

21 **PARTIES**

22 1. Ruth Ann Terry, M.P.H, R.N (Complainant) is the Executive Officer of
23 the Board of Registered Nursing (Board), Department of Consumer Affairs. She brought this
24 action solely in her official capacity and is represented in this matter by Leslie E. Brast, Deputy
25 Attorney General, for Edmund G. Brown Jr., Attorney General of the State of California.

26 2. Respondent, Sharon Senestraro, a.k.a. Sharon Elizabeth Dimino
27 (Respondent), is represented in this proceeding by attorney Russell S. Gans, whose address is
28 814 Seventh Street, Eureka, CA 95501-1114.

1 3. On or about June 11, 2002, the Board issued Registered Nurse License No.
2 600495 to Respondent. The license was in full force and effect at all times relevant to the
3 charges brought in Accusation No. 2006-193 and will expire on June 30, 2008, unless renewed.

4 JURISDICTION

5 4. Accusation No. 2006-193 was filed before the Board April 21, 2006. The
6 Accusation and all other statutorily required documents were properly served on Respondent on
7 May 1, 2006. Respondent timely filed her Notice of Defense contesting the Accusation.

8 5. On March 5, 2007, the Board filed First Amended Accusation No. 2006-
9 193 and properly served it and all other statutorily required documents on Respondent; it is
10 currently pending against Respondent. A copy of First Amended Accusation No. 2006-193 is
11 attached as "Exhibit A" and incorporated herein by reference.

12 ADVISEMENT AND WAIVERS

13 6. Respondent has carefully read, fully discussed with counsel, and
14 understands the charges and allegations in First Amended Accusation No. 2006-193.
15 Respondent has also carefully read, fully discussed with counsel, and understands the effects of
16 this Stipulated Settlement and Disciplinary Order.

17 7. Respondent is fully aware of her legal rights in this matter, including the
18 right to a hearing on the charges and allegations in the First Amended Accusation; the right to be
19 represented by counsel at her own expense; the right to confront and cross-examine the witnesses
20 against her; the right to present evidence and to testify on her own behalf; the right to the
21 issuance of subpoenas to compel the attendance of witnesses and the production of documents;
22 the right to reconsideration and court review of an adverse decision; and all other rights accorded
23 by the California Administrative Procedure Act and other applicable laws.

24 8. Respondent voluntarily, knowingly, and intelligently waives and gives up
25 each and every right set forth above.

26 CULPABILITY

27 9. Respondent admits the truth of each and every charge and allegation in
28 First Amended Accusation No. 2006-193.

1 10. Respondent agrees that her Registered Nurse License is subject to
2 discipline and she agrees to be bound by the Board's imposition of discipline as set forth in the
3 Disciplinary Order below.

4 CIRCUMSTANCES IN MITIGATION

5 11. Respondent has been a Registered Nurse for 12 years, licensed in
6 Maryland, Arizona and North Carolina in addition to California. Respondent has no prior history
7 of discipline against any of her multiple licenses. California excepted, her other nursing licenses
8 are inactive or expired. Respondent has a history of positive performance reviews throughout her
9 nursing career. These consistently describe her performance in numerous categories as at or
10 above average. She has also produced letters of recommendation and support, including a letter
11 from her current Administrative Nursing Supervisor who describes her as "a trusted and worthy
12 employee capable of working in [multiple hospital departments]," and a nurse who has
13 "exemplified high clinical skills, performed as a strong patient advocate, and demonstrated
14 excellent communication skills with staff, physicians and patients." In further mitigation of the
15 incident that gave rise to the pending disciplinary action, the communication failures identified in
16 First Amended Accusation No. 2006-193 were, in part, attributable to the absence of any hospital
17 policy or procedure addressing artificial airways including: physician oversight, apportionment of
18 duties between RNs and Respiratory Therapists, tracheostomy tube care, maintenance or capping
19 protocols. For this deficiency, the hospital was cited following a DHS investigation prompted by
20 the incident. The hospital subsequently corrected this failure by implementation of a
21 comprehensive tracheostomy care policy approved by DHS.

22 CONTINGENCY

23 12. This stipulation shall be subject to Board approval. Respondent
24 understands and agrees that counsel for Complainant and Board staff may communicate directly
25 with the Board regarding this stipulation and settlement, without notice to or participation by
26 Respondent or her counsel. By signing the stipulation, Respondent understands and agrees that
27 she may not withdraw her agreement or seek to rescind the stipulation prior to the time the Board
28 considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order,

1 the Stipulated Settlement and Disciplinary Order shall be of no force or effect and, except for this
2 paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not
3 be disqualified from further action by having considered this matter.

4 OTHER MATTERS

5 13. The parties understand and agree that facsimile copies of this Stipulated
6 Settlement and Disciplinary Order, including facsimile signatures thereto, shall have the same
7 force and effect as the originals.

8
9 DISCIPLINARY ORDER

10 In consideration of the foregoing admissions and stipulations, the parties agree
11 that the Board may, without further notice or formal proceeding, issue and enter the following
12 Disciplinary Order:

13 IT IS HEREBY ORDERED that Registered Nurse License No. 600495 issued to
14 Respondent Sharon Elizabeth Dimino (Respondent) is revoked; however, the revocation is stayed
15 subject to Respondent's successful completion of two (2) years probation on the following terms
16 and conditions.

17 **Severability Clause.** Each condition of probation contained herein is a separate
18 and distinct condition. If any condition of this Order, or any application thereof, is declared
19 unenforceable in whole, in part, or to any extent, the remainder of this Order, and all other
20 applications thereof, shall not be affected. Each condition of this Order shall separately be valid
21 and enforceable to the fullest extent permitted by law.

22 1. **Obey All Laws.** Respondent shall obey all federal, state and local laws.
23 A full and detailed account of any and all violations of law shall be reported by Respondent to
24 the Board in writing within seventy-two (72) hours of occurrence. To permit monitoring of
25 compliance with this condition, Respondent shall submit completed fingerprint forms and
26 fingerprint fees within 45 days of the effective date of the decision, unless previously submitted
27 as part of the licensure application process.

28 //

1 **Criminal Court Orders:** If Respondent is under criminal court orders, including
2 probation or parole, and the order is violated, this shall be deemed a violation of these probation
3 conditions, and may result in the filing of an Accusation and/or petition to revoke probation.

4 2. **Comply with the Board's Probation Program.** Respondent shall fully
5 comply with the conditions of the Probation Program established by the Board and cooperate
6 with representatives of the Board in its monitoring and investigation of the Respondent's
7 compliance with the Board's Probation Program. Respondent shall inform the Board in writing
8 within no more than 15 days of any address change and shall at all times maintain an active,
9 current license status with the Board, including during any period of suspension.

10 Upon successful completion of probation, Respondent's license shall be fully
11 restored.

12 3. **Report in Person.** Respondent, during the period of probation, shall
13 appear in person at interviews/meetings as directed by the Board or its designated
14 representatives.

15 4. **Residency, Practice, or Licensure Outside of State.** Periods of
16 residency or practice as a registered nurse outside of California shall not apply toward a reduction
17 of this probation time period. Respondent's probation is tolled, if and when she resides outside
18 of California. Respondent must provide written notice to the Board within 15 days of any change
19 of residency or practice outside the state, and within 30 days prior to re-establishing residency or
20 returning to practice in this state.

21 Respondent shall provide a list of all states and territories where she has ever been
22 licensed as a registered nurse, vocational nurse, or practical nurse. Respondent shall further
23 provide information regarding the status of each license and any changes in such license status
24 during the term of probation. Respondent shall inform the Board if she applies for or obtains a
25 new nursing license during the term of probation.

26 5. **Submit Written Reports.** Respondent, during the period of probation,
27 shall submit or cause to be submitted such written reports/declarations and verification of actions
28 under penalty of perjury, as required by the Board. These reports/declarations shall contain

1 statements relative to Respondent's compliance with all the conditions of the Board's Probation
2 Program. Respondent shall immediately execute all release of information forms as may be
3 required by the Board or its representatives.

4 Respondent shall provide a copy of this Decision to the nursing regulatory agency
5 in every state and territory in which she has a registered nurse license.

6 **6. Function as a Registered Nurse.** Respondent, during the period of
7 probation, shall engage in the practice of registered nursing in California for a minimum of 24
8 hours per week for a period of 6 consecutive months or as determined by the Board.

9 For purposes of compliance with the section, "engage in the practice of registered
10 nursing" may include, when approved by the Board, volunteer work as a registered nurse, or
11 work in any non-direct patient care position that requires licensure as a registered nurse.

12 The Board may require that advanced practice nurses engage in advanced practice
13 nursing for a minimum of 24 hours per week for 6 consecutive months or as determined by the
14 Board.

15 If Respondent has not complied with this condition during the probationary term,
16 and Respondent has presented sufficient documentation of her good faith efforts to comply with
17 this condition, and if no other conditions have been violated, the Board, in its discretion, may
18 grant an extension of Respondent's probation period up to one year without further hearing in
19 order to comply with this condition. During the one year extension, all original conditions of
20 probation shall apply.

21 **7. Employment Approval and Reporting Requirements.** Respondent
22 shall obtain prior approval from the Board before commencing or continuing any employment,
23 paid or voluntary, as a registered nurse. Respondent shall cause to be submitted to the Board all
24 performance evaluations and other employment related reports as a registered nurse upon request
25 of the Board.

26 Respondent shall provide a copy of this Decision to her employer and immediate
27 supervisors prior to commencement of any nursing or other health care related employment.

28 In addition to the above, Respondent shall notify the Board in writing within

seventy-two (72) hours after she obtains any nursing or other health care related employment. Respondent shall notify the Board in writing within seventy-two (72) hours after she is terminated or separated, regardless of cause, from any nursing, or other health care related employment with a full explanation of the circumstances surrounding the termination or separation.

8. **Supervision.** Respondent shall obtain prior approval from the Board regarding Respondent's level of supervision and/or collaboration before commencing or continuing any employment as a registered nurse, or education and training that includes patient care.

Respondent shall practice only under the direct supervision of a registered nurse in good standing (no current discipline) with the Board of Registered Nursing, unless alternative methods of supervision and/or collaboration (e.g., with an advanced practice nurse or physician) are approved.

Respondent's level of supervision and/or collaboration may include, but is not limited to the following:

(a) Maximum - The individual providing supervision and/or collaboration is present in the patient care area or in any other work setting at all times.

(b) Moderate - The individual providing supervision and/or collaboration is in the patient care unit or in any other work setting at least half the hours Respondent works.

(c) Minimum - The individual providing supervision and/or collaboration has person-to-person communication with Respondent at least twice during each shift worked.

(d) Home Health Care - If Respondent is approved to work in the home health care setting, the individual providing supervision and/or collaboration shall have person-to-person communication with Respondent as required by the Board each work day. Respondent shall maintain telephone or other telecommunication contact with the individual providing supervision and/or collaboration as required by the Board during each work day. The individual providing supervision and/or collaboration shall conduct, as required by the Board, periodic, on-site visits to patients' homes visited by Respondent with or without Respondent present.

1 **9. Employment Limitations.** Respondent is approved to continue working
2 in her present position as an in-house pool nurse at Saint Joseph Hospital (SJH) in Eureka,
3 California, under the supervision of nurse manager Kirk Thompson, RN, and provided she
4 restricts her practice to the Emergency Department, Intensive Care Unit, Progressive Care Unit or
5 the Post-Anesthesia Care Unit consistent with her contractual obligations. Respondent shall not
6 work for a nurse's registry, in any private duty position as a registered nurse, a temporary nurse
7 placement agency, a traveling nurse, or for an in-house nursing pool with the exception of her
8 approved position with SJH. Without prior approval from the Board, Respondent's employment
9 as a Registered Nurse in any setting, position, or under any supervisor, other than that described
10 above, shall constitute a violation of probation.

11 Respondent shall not work for a licensed home health agency as a visiting nurse
12 unless the registered nursing supervision and other protections for home visits have been
13 approved by the Board. Respondent shall not work in any other registered nursing occupation
14 where home visits are required.

15 Respondent shall not work in any health care setting as a supervisor of registered
16 nurses. The Board may additionally restrict Respondent from supervising licensed vocational
17 nurses and/or unlicensed assistive personnel on a case-by-case basis.

18 Respondent shall not work as a faculty member in an approved school of nursing
19 or as an instructor in a Board approved continuing education program.

20 Respondent shall work only on a regularly assigned, identified and predetermined
21 worksite(s) and shall not work in a float capacity.

22 If Respondent is working or intends to work in excess of 40 hours per week, the
23 Board may request documentation to determine whether there should be restrictions on the hours
24 of work.

25 **10. Complete a Nursing Course(s).** Respondent, at her own expense, shall
26 enroll and successfully complete a course(s) relevant to the practice of registered nursing no later
27 than six months prior to the end of her probationary term.

28 Respondent shall obtain prior approval from the Board before enrolling in the

1 course(s). Respondent shall submit to the Board the original transcripts or certificates of
2 completion for the above required course(s). The Board shall return the original documents to
3 Respondent after photocopying them for its records.

4 11. **Cost Recovery.** Respondent shall pay to the Board costs associated with
5 its investigation and enforcement pursuant to Business and Professions Code section 125.3 in the
6 amount of \$4,453.50. Respondent shall be permitted to pay these costs in a payment plan
7 approved by the Board, with payments to be completed no later than three months prior to the
8 end of the probation term.

9 If Respondent has not complied with this condition during the probationary term,
10 and Respondent has presented sufficient documentation of her good faith efforts to comply with
11 this condition, and if no other conditions have been violated, the Board, in its discretion, may
12 grant an extension of Respondent's probation period up to one year without further hearing in
13 order to comply with this condition. During the one year extension, all original conditions of
14 probation will apply.

15 12. **Violation of Probation.** If Respondent violates the conditions of her
16 probation, the Board after giving Respondent notice and an opportunity to be heard, may set
17 aside the stay order and impose the stayed discipline (revocation/suspension) of Respondent's
18 license.

19 If during the period of probation, an Accusation or petition to revoke probation
20 has been filed against Respondent's license or the Attorney General's Office has been requested
21 to prepare an Accusation or petition to revoke probation against Respondent's license, the
22 probationary period shall automatically be extended and shall not expire until the Accusation or
23 petition has been acted upon by the Board.

24 13. **License Surrender.** During Respondent's term of probation, if she ceases
25 practicing due to retirement, health reasons or is otherwise unable to satisfy the conditions of
26 probation, Respondent may surrender her license to the Board. The Board reserves the right to
27 evaluate Respondent's request and to exercise its discretion whether to grant the request, or to
28 take any other action deemed appropriate and reasonable under the circumstances, without

1 further hearing. Upon formal acceptance of the tendered license and wall certificate, Respondent
2 will no longer be subject to the conditions of probation.

3 Surrender of Respondent's license shall be considered a disciplinary action and
4 shall become a part of Respondent's license history with the Board. A registered nurse whose
5 license has been surrendered may petition the Board for reinstatement no sooner than the
6 following minimum periods from the effective date of the disciplinary decision:

7 (1) Two years for reinstatement of a license that was surrendered for any
8 reason other than a mental or physical illness; or

9 (2) One year for a license surrendered for a mental or physical illness.

10
11 ACCEPTANCE

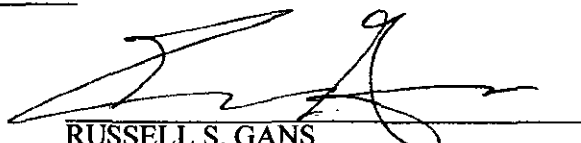
12 I have carefully read the above Stipulated Settlement and Disciplinary Order and
13 have fully discussed it with my attorney, Russell S. Gans. I understand the stipulation and the
14 effect it will have on my Registered Nurse License. I enter into this Stipulated Settlement and
15 Disciplinary Order voluntarily, knowingly and intelligently, and agree to be bound by the
16 Decision and Order of the Board of Registered Nursing.

17 DATED: 4-4-07.

18
19 
20 SHARON SENESTRARO
21 Respondent

22 I have read and fully discussed with my client, Respondent Sharon Senestraro, the
23 terms and conditions and other matters contained in the above Stipulated Settlement and
24 Disciplinary Order. I approve its form and content.

25 DATED: 4-17-07.

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28 RUSSELL S. GANS
Attorney for Respondent

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ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Board of Registered Nursing of the Department of Consumer Affairs.

DATED: March 4, 2007

EDMUND G. BROWN JR., Attorney General
of the State of California

FRANK H. PACOE
Supervising Deputy Attorney General



LESLIE E. BRAST
Deputy Attorney General

Attorneys for Complainant

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Exhibit A
First Amended Accusation No. 2006-193

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8 **BEFORE THE**
9 **BOARD OF REGISTERED NURSING**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

13 **SHARON SENESTRARO**
14 **a.k.a. SHARON ELIZABETH DIMINO**
314 Corinna Court
Fortuna, CA 95504

15 Registered Nurse License No. 600495

Respondent.

Case No. 2006-193

OAH No. 2006060936

FIRST AMENDED ACCUSATION

16 Complainant alleges:

17 **PARTIES**

18 1. Ruth Ann Terry, M.P.H., R.N. (Complainant), brings this Accusation
19 solely in her official capacity as the Executive Officer of the Board of Registered Nursing
20 (Board), Department of Consumer Affairs.

21 2. On or about June 11, 2002, the Board issued Registered Nurse License
22 Number 600495 to Sharon Senestraro, a.k.a. Sharon Elizabeth Dimino (Respondent). The
23 license was in full force and effect at all times relevant to the charges brought herein and will
24 expire on June 30, 2008, unless renewed.

25 **JURISDICTION**

26 3. This Accusation is brought before the Board under the authority of the
27 following laws. All section references are to the Business and Professions Code (Code) unless
28 otherwise indicated.

FACTUAL BACKGROUND

9. On November 6, 2002, Respondent was working as a travel nurse at St. Joseph Hospital in Eureka, California. Respondent was responsible for the care of a 72-year-old patient, BB,¹ who had undergone abdominal surgery and a tracheotomy when she could not wean from a ventilator following surgery. BB suffered from severe emphysema and cardiopulmonary disease. As a result, her lung function was compromised and she was prone to episodes of respiratory distress. Following her abdominal surgery, BB was equipped with a fenestrated tracheostomy² tube and medical staff was attempting to wean her from respiratory support.

10. At 1:00 PM on November 6, 2002, BB's treating physician ordered her off the ventilator and her tracheostomy capped. Sometime between 1:20 PM and 2:36 PM, Respondent capped BB's tracheostomy. Shortly thereafter, BB went into respiratory arrest. CPR was administered and BB revived.

11. Respondent was the last person with BB prior to her respiratory arrest. Respondent admits capping BB's tracheostomy tube in an attempt to facilitate communication while BB was sitting in a recliner. Respondent further admits remaining with the patient for "a brief period" before being "summoned urgently to attend" another patient.

12. Respondent's charting around this event is generally incomplete, inconsistent and confusing. Her entries on the flow-sheet do not correspond with her narrative

1. The patient's initials are used to protect her privacy. Her full name was disclosed to Respondent in initial discovery.

2. A tracheostomy is an opening from the trachea, or windpipe. A surgical incision is made into the trachea through the skin and muscles of the neck to create an airway. The term "tracheostomy" is sometimes used interchangeably with the term "tracheotomy"; strictly speaking however, tracheostomy refers to the opening itself while a tracheotomy is the surgical procedure. During a tracheotomy, a tube is placed in the trachea to facilitate breathing. An inflatable cuff is attached to the tube. When inflated, it forms a seal against the wall of the windpipe and prevents air from flowing through the mouth and nose. As a result, air flow bypasses the vocal cords inhibiting production of sound and speech. Tracheostomy tubes have both an inner and outer cannula. A fenestrated tracheostomy tube has a hole (or fenestration) in the outer cannula to facilitate communication. The inner cannula must be removed when speaking to allow for air to pass over the vocal chords, producing the vibrations necessary for audible speech.

1 documentation related to BB's airway/respiratory care. Respondent's entries in the "Critical Care
2 Patient Flow Sheet" reflect various times entered and then lined out with new times written in.
3 Her narrative note at 2:27 PM indicates, "Tracheostomy was capped briefly with [oxygen] sats
4 above 97%." This conflicts with the times that appear in the "Significant Event" column, as well
5 as Respondent's written statement that she capped BB's tracheostomy at 2:00 PM. It is thus
6 impossible, based on Respondent's charting, to establish with any certainty when she capped the
7 tube or otherwise reconcile the time-line.

8 13. In her July 6, 2006 statement responding to the Board's initial Accusation,
9 Respondent writes: "I acknowledge my responsibility to ensure a patient airway for my patients
10 and recognize a failure of adequate communication with the Respiratory Therapist's activity
11 regarding the status of the patient's tracheostomy cuff at the time I placed the cap. I feel this was
12 an unfortunate miscommunication that resulted in the patient being impacted briefly."

13 CAUSE FOR DISCIPLINE

14 (Unprofessional Conduct)

15 14. Respondent is subject to disciplinary action under Code section 2761(a)
16 for unprofessional conduct in that, while caring for a 72-year-old post-surgical patient as a
17 Registered Nurse at Saint Joseph Hospital, she failed to adequately communicate with other
18 medical professionals involved in the patient's care and/or failed to adequately document her
19 care of the patient as set forth below:

20 a. Respondent admits that her communication with the patient's
21 Respiratory Therapist was inadequate.

22 b. Respondent admits being "summoned urgently to attend" another
23 patient after observing Patient BB for only a "brief period of time" immediately after capping
24 BB's tracheostomy tube. In doing so, Respondent failed to ensure the safety and well-being of
25 her patient before leaving her unattended.

26 c. Respondent's charting of her care involving Patient BB was
27 incomplete, inconsistent and confusing.

28 15. The circumstances are further detailed in Paragraphs 9 through 13, above.

1 PRAYER

2 WHEREFORE, Complainant requests that a hearing be held on the matters herein
3 alleged and that, following the hearing, the Board of Registered Nursing issue a decision:

4 1. Revoking or suspending Registered Nurse License Number 600495, issued
5 to Sharon Senestraro, a.k.a. Sharon Elizabeth Dimino;

6 2. Ordering Sharon Senestraro, a.k.a. Sharon Elizabeth Dimino, to pay the
7 Board of Registered Nursing the reasonable costs of the investigation and enforcement of this
8 case, pursuant to Business and Professions Code section 125.3; and,

9 3. Taking such other and further action as deemed necessary and proper.

10
11 DATED: March 5, 2007

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13 

14 RUTH ANN TERRY, M.P.H., R.N.
15 Executive Officer
16 Board of Registered Nursing
17 Department of Consumer Affairs
18 State of California
19 Complainant
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